PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10805307

								T(U000004					
CLAIMS AS FILED - PART I								SMALL ENTITY OTHER THAI					
TOTAL CLAIMS			(Colur	(Column 1)		(Column 2)		TYPE		OR		L ENTITY	
<u> </u>			10					RATE	FEE		RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE 385.0	OR	BASIC FE	E 770.00	
TOTAL CHARGEABLE CLAIMS			119-4	1 — minus 20=		· 8		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = *		*	18		X43=		-	X86=		
М	JLTIPLE DEPE	NDENT CLAIM I	PRESENT							OR	7,000		
* 11	the differenc	e in column 1 is	s less than :	ess than zero, enter "0" in			'	+145=		OR	+290=	<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	·	OR	TOTAL	IA)		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY						
	I	T	(COIUIT		(Column 3)		SWALL	ENIIIY	OR	SMALL	ENIIIY		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	<u> * </u>	Minus	***		=		X43=	1		X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								†	OR	·		
								+145=		OR	+290=		
								TOTAL DDIT. FEE		OR ,	TOTAL DDIT. FEE		
_	••	(Column 1)		(Colum		(Column 3)	·						
AMENOMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≃ .		
A ME	Independent	*	Minus	***		=		X43=	· · · · · ·	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						T	+145=		OR	+290=	·	
							TOTAL		_ L	TOTAL			
	(Column 1) (Column 2) (Column 3)									O A	DDIT. FEE		
	`	CLAIMS		HIGHES		(00:0:::::0)	_			_			
AMENDMENIC		REMAINING AFTER AMENDMENT		NUMBE PREVIOU: PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	ndependent		Minus	track		=		X43=		`` 			
1	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	\ 		OR L	X86=		
• ! f 1	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290 <u>=</u>		
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE													
Th	e "Highest Numb	ber Previously Paid	For (Total or	Independent)	is the h	ighest number f	ound	in the app	ropriate box			. 7	